



Please type a plus sign (+) inside this box →

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

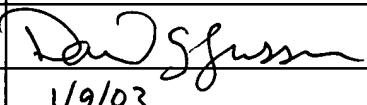
(to be used for all correspondence after initial filing)

Application Number	09/451,090
Filing Date	11/30/1999
First Named Inventor	Sandhu <b>RECEIVED</b> JAN 10 2003
Group Art Unit	2155 <b>Technology Center 2100</b>
Examiner Name	Khanh Dinh
Total Number of Pages in This Submission	19
Attorney Docket Number	GMU-16U

### ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	David G. Grossman, Registration Number 42,609
Signature	
Date	1/9/03

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

Typed or printed name	
Signature	
Date	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



#10/B

Docket No. GMU-16U

PATENT APPLICATION

LDD  
1-23-03  
enfiled

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Sandhu et al.

)

)

Serial No. 09/451,090

)

Examiner: Khanh Dinh

)

Filed: November 30, 1999

)

Art Unit: 2155

RECEIVED

JAN 10 2003

For: SYSTEMS AND APPARATUS FOR  
STORAGE AND TRANSFER OF  
SECURE DATA ON WEB

)

Technology Center 2100

**SUPPLEMENTAL AMENDMENT UNDER 37 C.F.R. § 1.111**  
Honorable Assistant Commissioner for Patents  
Washington, D.C. 20231

Sir:

This amendment is responsive to the amendment of December 17, 2002 and supplemental to the office action dated July 17, 2002. Please amend the above-captioned application as set forth below:

**AMENDMENT****In The Claims**

Please cancel claims 40 through 78.

Please add the following claims: